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| B1 (Official Form 1)(04/13)  |   |  | L  |                              | ımer                                    | IL F  | age 1   | 01 45  |                         |   |                             |
|--|---|--|--|------------------------------|---|---|---|--|-------------------------|---|-----------------------------|
| ·  |   |  | tes Ban<br>n Distric   |                              |   |   | t   |  |                         | Voluntar  | y Petition                  |
| Name of Debtor (if individence of Debtor (if | ıal, enter Last, Fi   | rst, Middl   | le):   |                              |   | Nan   | ne of Joint   | Debtor (Spou   | ise) (Last, First,      | Middle):  |                             |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):   |   |  |  | All (inc                     | Other Nam<br>ude marrie                 | es used by the  | e Joint Debtor in<br>nd trade names):                                   | n the last 8 years   |                         |   |                             |
| Last four digits of Soc. Sec. (if more than one, state all)  | or Individual-Ta  | payer I.D  | D. (ITIN)/Co   | mplet                        | e EIN                                   | Last<br>(if mo  | four digits<br>re than one, st  | of Soc. Sec.   | or Individual-Ta        | axpayer I.D. (ITIN) î   | No./Complete EIN            |
| Street Address of Debtor (No.<br>435 Morton Street<br>Hoffman Estates, IL  | o. and Street, City   | , and Sta  | te):   | 2                            | IP Code                                 |   | et Address  | of Joint Debt  | or (No. and Stre        | et, City, and State):   | an a l                      |
|  |   |  |  | 601                          |   |   |   |  |                         |   | ZIP Code                    |
| County of Residence or of the  | e Principal Place   | of Busin   | ess:   |                              |   | Cour  | ity of Resi   | dence or of th   | e Principal Plac        | ee of Business:   |                             |
| Mailing Address of Debtor (  | f different from s  | treet addr   | ress):   |                              |   | Mail  | ing Addres  | s of Joint Del   | btor (if different      | from street address)  |                             |
|  |   |  | r  | Z                            | IP Code                                 |   |   |  |                         |   | ZIP Code                    |
| Location of Principal Assets<br>(if different from street addre  | of Business Debt<br>ss above):  | or   |  |                              | • |   |   |  |                         | ***************************************   |                             |
| Type of Deb<br>(Form of Organization) (6   |   |  | Nature   |                              |   |   |   |  |                         | y Code Under Whi  | eh                          |
| <ul> <li>Individual (includes Joint See Exhibit D on page 2 of the Corporation (includes LL Partnership</li> <li>Other (If debtor is not one of check this box and state type)</li> </ul>  | Debtors) nis form. C and LLP) f the above entities, of entity below.) | Sir<br>in<br>Ra<br>Sto                                 | ealth Care B<br>ngle Asset R<br>11 U.S.C. §<br>tilroad<br>ockbroker<br>ommodity Br<br>earing Bank  | Real E<br>101 (<br>roker     | ss<br>state as                          | defined   | Chap Chap Chap Chap Chap  | oter 7<br>oter 9<br>oter 11<br>oter 12   | ☐ Cha<br>of a<br>☐ Cha  | d (Check one box)  pter 15 Petition for R  Foreign Main Proceed  pter 15 Petition for R  Foreign Nonmain Pr | eding<br>ecognition         |
| Chapter 15 Dei Country of debtor's center of mai Each country in which a foreign by, regarding, or against debtor is   | in interests:   | und  | Tax-Exe<br>(Check boots<br>btor is a tax-e<br>der Title 26 of<br>de (the Interna   | x, if ap<br>xempt<br>f the U | oplicable<br>organiza<br>nited Sta      | ation<br>ates   | define  | ed in 11 U.S.C.<br>red by an indiv   | (Check o onsumer debts, | ne box)  Debts busine   | are primarily<br>ess debts. |
| Filing F  Full Filing Fee attached  Filing Fee to be paid in install attach signed application for t debtor is unable to pay fee exform 3A.  Filing Fee waiver requested (a attach signed application for the signed application for the signed attach signed attach signed attach signed application for the signed attach signed application for the signed attach signed at | he court's considera<br>cept in installments.<br>pplicable to chapter | o individua<br>tion certify<br>Rule 1006<br>7 individu | ving that the b(b). See Office that the black of the blac | cial<br>ust                  | Check if Do are Check al                | ebtor is a si<br>ebtor is not<br>ebtor's agg<br>e less than<br>Il applicable<br>plan is bein<br>ecceptances | regate nonce<br>\$2,490,925<br>boxes:<br>ag filed with<br>of the plan v | s debtor as defi<br>iness debtor as<br>ontingent liquid<br>(amount subject<br>this petition. | to adjustment on        | § 101(51D).   | e years thereafter).        |
| Statistical/Administrative In  Debtor estimates that fund  Debtor estimates that, after there will be no funds avail   | s will be available<br>any exempt proj                                | erty is ex   | cluded and   | admi                         | red cred                                | litors.   | ***************************************                                 | S.C. § 1126(b).  | ·                       | ACE IS FOR COURT I  | JSE ONLY                    |
| Estimated Number of Creditor  1- 50- 100- 49 99 199  | s<br>200-<br>999  | 1,000-<br>5,000  | 5,001-<br>10,000   | 10,0<br>25,0                 | 01- 2                                   | 25,001-<br>50,000   | 50,001-<br>100,000  | OVER<br>100,000  |                         |   |                             |
| Estimated Assets   | 01 to \$500,001<br>00 to \$1<br>million                               | \$1,000,001<br>to \$10<br>million                      | \$10,000,001<br>to \$50<br>million   | S50,0<br>to \$10<br>millio   | 00,001 \$                               | 5100,000,001<br>o \$500<br>nillion  | \$500,000,001 to \$1 billion  | More than<br>\$1 billion   |                         |   |                             |
| Stimated Liabilities   | 01 to \$500,001   | \$1,000,001<br>to \$10                                 | \$10,000,001<br>to \$50  | \$50,00<br>to \$10           | 00,001 \$                               | 100,000,001<br>o \$500  | \$500,000,001 to \$1 billion  | More than<br>\$1 billion   |                         |   |                             |

| B1 (Official F                           | Case 15-18793 Doc 1 Filed 05/29/15   | 5 Entered 05/29/15 09<br>Page 2 of 45  | :08:52 Desc Main                     |
|--|--|--|--------------------------------------|
|  | ry Petition  | Name of Debtor(s):   | rage 2                               |
|  | nust be completed and filed in every case)   | Wishnoff, Laura E.   |                                      |
| (xiiii page ii                           | All Prior Bankruptcy Cases Filed Within Las  | t 8 Years (If more than two, attach  | andditional sheet)                   |
| Location<br>Where Filed                  |  | Case Number:   | Date Filed:                          |
| Location<br>Where Filed:                 |  | Case Number:   | Date Filed:                          |
| P  | ending Bankruptcy Case Filed by any Spouse, Partner, or  | Affiliate of this Debtor (If more t  | han one, attach additional sheet)    |
| Name of Del                              |  | Case Number:   | Date Filed:                          |
| District:                                |  | Relationship:  | Judge:                               |
| forms 10K<br>pursuant to<br>and is reque | Exhibit A  spleted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 esting relief under chapter 11.)  t A is attached and made a part of this petition. | (To be completed if debtor is an individed I, the attorney for the petitioner name have informed the petitioner that the |                                      |
|  | Exh or own or have possession of any property that poses or is alleged to d Exhibit C is attached and made a part of this petition.  | ibit C  pose a threat of imminent and identifia  | ble harm to public health or safety? |
| Exhibit  If this is a jo                 | pleted by every individual debtor. If a joint petition is filed, each D completed and signed by the debtor is attached and made a  | part of this petition.   | n a separate Exhibit D.)             |
|  | Information Regarding  |  |                                      |
|  | (Check any app<br>Debtor has been domiciled or has had a residence, principa   | l place of business, or principal ass  | sets in this District for 180        |
|  | days immediately preceding the date of this petition or for a<br>There is a bankruptcy case concerning debtor's affiliate, ger   | · · · · · · · · · · · · · · · ·  |                                      |
|  | Debtor is a debtor in a foreign proceeding and has its princi<br>this District, or has no principal place of business or assets<br>proceeding [in a federal or state court] in this District, or the<br>sought in this District.   | pal place of business or principal a   | assets in the United States in       |
|  | Certification by a Debtor Who Resides  | as a Tenant of Residential Propo   | erty                                 |
|  | (Check all appli<br>Landlord has a judgment against the debtor for possession of   | , , , , , , , , , , , , , , , , , , ,  | d, complete the following.)          |
|  | (Name of landlord that obtained judgment)  |  |                                      |
|  | (Address of landlord)  | ············   |                                      |
|  | Debtor claims that under applicable nonbankruptcy law, then<br>the entire monetary default that gave rise to the judgment for  | r possession, after the judgment for   | r possession was entered, and        |
|  | Debtor has included with this petition the deposit with the coafter the filing of the petition.  |  |                                      |
|  | Debtor certifies that he/she has served the Landlord with this   | s certification. (11 U.S.C. § 362(1))  |                                      |

| В  | 1 (Official Form 1)(04/13)  | Document   | Page 3 of 45  |
|----|---|--|---|
|    | Voluntary Petition  |  | Name of Debtor(s):  |
| 1  | This page must be completed and filed in every case)  |  | Wishnoff, Lau   |
| F  | programme of comprehend and filed in every case)  | Sign   | latures   |
| 2  | Signature(s) of Debtor(s) (Individual/J  I declare under penalty of perjury that the information propetition is true and correct.  [If petitioner is an individual whose debts are primarily cohase chosen to file under chapter 7] I am aware that I may chapter 7, 11, 12, or 13 of title 11, United States Code, un available under each such chapter, and choose to proceed [If no attorney represents me and no bankruptcy petition petition] I have obtained and read the notice required by I request relief in accordance with the chapter of title 11, I specified in this potition.  Signature of Joint Debtor  Telephone Number (If not represented by attorney)  Date  Signature of Attorney* | ovided in this onsumer debts and proceed under derstand the relief under chapter 7. oreparer signs the 1 U.S.C. §342(b). | I declare under pensis true and correct, to proceeding, and that (Check only one box.)  I request relief in Certified copies of title 11 specific recognition of the Signature of For Printed Name of Date  Signature of I declare under pen preparer as defined compensation and I and the notices and 110(h), and 342(b): |
| >  | Signature of Attorney for Debtor(s)  Lester A. Ottenheimer III 3127572  Printed Name of Attorney for Debtor(s)  Ottenheimer Law Group, LLC  Firm Name  750 Lake Cook Road Suite 290 Buffalo Grove, IL 60089  Address  |  | pursuant to 11 U.S. chargeable by bank of the maximum andebtor or accepting Official Form 19 is  Printed Name and Social-Security nan individual, starprincipal, respons preparer.)(Require   |
|    | Telephone Number  Date *In a case in which § 707(b)(4)(D) applies, this signature also certification that the attorney has no knowledge after an inquinformation in the schedules is incorrect.   | so constitutes a uiry that the   | Address X   |
|    | Signature of Debtor (Corporation/Partne   | rship)   | Date  |
| *7 | I declare under penalty of perjury that the information provide petition is true and correct, and that I have been authorized to on behalf of the debtor.  The debtor requests relief in accordance with the chapter of States Code, specified in this petition.  | ded in this<br>o file this petition  | Signature of bankrup<br>person, or partner wh<br>Names and Social-S<br>assisted in preparing<br>not an individual:  |
| X  | Signature of Authorized Individual  Printed Name of Authorized Individual  Title of Authorized Individual   |  | If more than one per conforming to the ap A bankruptcy petition title 11 and the Feder  |
|    |   |  | fines or imprisonmen  |

Date

nnoff, Laura E. Signature of a Foreign Representative are under penalty of perjury that the information provided in this petition and correct, that I am the foreign representative of a debtor in a foreign ding, and that I am authorized to file this petition. only one box.) quest relief in accordance with chapter 15 of title 11. United States Code. tified copies of the documents required by 11 U.S.C. §1515 are attached. suant to 11 U.S.C. §1511, I request relief in accordance with the chapter itle 11 specified in this petition. A certified copy of the order granting ognition of the foreign main proceeding is attached. ature of Foreign Representative ed Name of Foreign Representative ignature of Non-Attorney Bankruptcy Petition Preparer are under penalty of perjury that: (1) I am a bankruptcy petition rer as defined in 11 U.S.C. § 110; (2) I prepared this document for ensation and have provided the debtor with a copy of this document e notices and information required under 11 U.S.C. §§ 110(b), ), and 342(b); and, (3) if rules or guidelines have been promulgated ant to 11 U.S.C. § 110(h) setting a maximum fee for services eable by bankruptcy petition preparers, I have given the debtor notice maximum amount before preparing any document for filing for a or accepting any fee from the debtor, as required in that section. I Form 19 is attached. ed Name and title, if any, of Bankruptcy Petition Preparer l-Security number (If the bankrutpcy petition preparer is not lividual, state the Social Security number of the officer, pal, responsible person or partner of the bankruptcy petition rer.)(Required by 11 U.S.C. § 110.)

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

## **RETENTION AGREEMENT**

## BEFORE THE CASE IS FILED:

## The Debtor Agrees To:

- 1. Discuss with attorney the Debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income

## The Attorney Agrees To:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 7 or Chapter 13 case, discuss both procedures (as well as non-bankruptcy options) with the debtor and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees, if any, are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and scheduled, as well as all amendments thereto, whether filed with the petition or the later.
  - 4. Timely prepare and file the debtor's petition, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, with particular attention to housing and vehicle payments.
  - 6. Advise the debtor of the need to maintain appropriate insurance.

## AFTER THE CASE IS FILED:

## The Debtor Agrees To:

- 1. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card (If the identification card does not include the debtor's social security number, the debtor will also bring to the meeting a social security card.)
  - 2. Notify the attorney of any change in the debtor's address or telephone number.
- 3. Inform the attorney immediately of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.

- 4. Contact the attorney immediately if the debtor loses employment, has a significant change in income or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings or an inheritance).
- 5. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 6. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 7. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
  - 8. Supply the attorney with copies of all tax returns filed while the case is pending.
  - 9. Sign another Retention Agreement after the case is filed.

## The Attorney Agrees To:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination).
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any other court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 7 trustee properly documented proof of income, pay advices and required tax returns for the debtor including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file and serve an amended plan.
- 7. Timely prepare, file and serve any necessary statements, amended statements and schedules and any change of address, in accordance with information provided by the debtor.
  - 8. Be available to respond to the debtor's questions.
  - 9. Prepare, file and serve timely amendments, if necessary.

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- 10. Object to improper or invalid claims, if necessary.
- 11. Timely respond to motions for relief from stay.
- 12. Prepare, file, and serve all appropriate motions to avoid liens.
- 13. Provide any other legal services necessary for the administration of the case.

## Payment of Attorneys' Fees:

1. For all the services outlined above, the attorney will be paid a fee of \$2,800.00 plus \$335.00 filing fee.

Prior to signing this agreement, the attorney has received \$2,800.00 leaving a balance due of \$0.00.

- 2. Early termination of the case. Fees payable under the provisions set out above are not refundable in the event that the case is dismissed, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If a dismissal is due to such a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 3. *Improper conduct by the attorney.* If the Debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 4. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise not engaging in proper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.

5. Discharge of the attorney. The debtor may discharge the attorney at any time.

Signed:

Laura E. Wishnoff

Lester A. Ottenheimer, III Attorney for Debtor(s) Case 15-18793 Doc 1 Filed 05/29/15 Entered 05/29/15 09:08:52 Desc Main Document Page 7 of 45

B 1D (Official Form 1, Exhibit D) (12/09)

## United States Bankruptcy Court Northern District of Illinois

|       |                   | Northern District of Illinois |          |   |
|-------|-------------------|-------------------------------|----------|---|
| In re | Laura E. Wishnoff |                               | Case No. |   |
|       |                   | Debtor(s)                     | Chapter  | 7 |

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.

□2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.

□3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

□4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

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| B 1D (Official Form 1, Exhibit D) (12/09) - Cont. Page   |
|--|
| □Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or ment deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);         |
| □Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); |
| □Active military duty in a military combat zone.   |
| □5. The United States trustee or bankruptcy administrator has determined that the credit counseling equirement of 11 U.S.C. § 109(h) does not apply in this district.  |
| I certify under penalty of perjury that the information provided above is true and correct.  |
| Signature of Debtor:   |
| Date: Laura E. Wishnoff  |

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B6 Summary (Official Form 6 - Summary) (12/14)

# **United States Bankruptcy Court Northern District of Illinois**

| In re | Laura E. Wishnoff |        | Case No |   |  |
|-------|-------------------|--------|---------|---|--|
| -     |                   | Debtor | •,      |   |  |
|       |                   |        | Chapter | 7 |  |
|       |                   |        | * -     |   |  |

## **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE  | ATTACHED<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS            | LIABILITIES | OTHER    |
|---|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property   | Yes                  | 1                | 185,000.00        |             |          |
| B - Personal Property   | Yes                  | 3                | 20,370.00         |             |          |
| C - Property Claimed as Exempt  | Yes                  | 1                |                   |             |          |
| D - Creditors Holding Secured Claims  | Yes                  | 1                |                   | 190,249.00  |          |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes                  | 1                |                   | 0.00        |          |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                           | Yes                  | 3                |                   | 55,522.84   |          |
| G - Executory Contracts and<br>Unexpired Leases                                 | Yes                  | 1                |                   |             |          |
| H - Codebtors   | Yes                  | 1                |                   |             |          |
| I - Current Income of Individual<br>Debtor(s)                                   | Yes                  | 2                |                   |             | 1,945.84 |
| J - Current Expenditures of Individual Debtor(s)                                | Yes                  | 2                |                   |             | 4,510.68 |
| Total Number of Sheets of ALL Schedu  | ıles                 | 16               |                   |             |          |
|   | T                    | otal Assets      | 205,370.00        |             |          |
|   |                      |                  | Total Liabilities | 245,771.84  |          |

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B 6 Summary (Official Form 6 - Summary) (12/14)

# **United States Bankruptcy Court Northern District of Illinois**

| In re | Laura E. Wishnoff |        | Case No |   |  |
|-------|-------------------|--------|---------|---|--|
| -     |                   | Debtor | .,      |   |  |
|       |                   |        | Chapter | 7 |  |

# STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability   | Amount |
|---|--------|
| Domestic Support Obligations (from Schedule E)  | 0.00   |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | 0.00   |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00   |
| Student Loan Obligations (from Schedule F)  | 0.00   |
| Domestic Support, Separation Agreement, and Divorce Decree<br>Obligations Not Reported on Schedule E                | 0.00   |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | 0.00   |
| TOTAL   | 0.00   |

### State the following:

| Average Income (from Schedule I, Line 12)  | 1,945.84 |
|--|----------|
| Average Expenses (from Schedule J, Line 22)  | 4,510.68 |
| Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14) | 6,169.75 |

### State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY"     column              |      | 5,777.00  |
|--|------|-----------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column             | 0.00 |           |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |      | 0.00      |
| 4. Total from Schedule F   |      | 55,522.84 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |      | 61,299.84 |

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B6A (Official Form 6A) (12/07)

| In re | Laura E. Wishnoff |        | Case No.   |  |
|-------|-------------------|--------|------------|--|
| -     |                   | Debtor | <b>-</b> > |  |

## **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Debtor's residence - 435 Morton Street, Hoffman | Owner                                      | -   | 185,000.00   | 167,372.00                 |
|---|--|---|--|----------------------------|
| Description and Location of Property            | Nature of Debtor's<br>Interest in Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in<br>Property, without<br>Deducting any Secured<br>Claim or Exemption | Amount of<br>Secured Claim |

Sub-Total > 185,000.00 (Total of this page)

185,000.00 Total >

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B6B (Official Form 6B) (12/07)

| In re | Laura E. Wishnoff | Case No |  |
|-------|-------------------|---------|--|
| _     |                   | Debtor  |  |

## SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

|     |   |                  | ,  |   |  |
|-----|---|------------------|--|---|--|
|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property   | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property<br>without Deducting any<br>Secured Claim or Exemption |
| 1.  | Cash on hand  | С                | cash on Debtor's person  | -   | 20.00  |
| 2.  | Checking, savings or other financial  | С                | checking account at Chase  | -   | 250.00   |
|     | accounts, certificates of deposit, or<br>shares in banks, savings and loan,<br>thrift, building and loan, and<br>homestead associations, or credit<br>unions, brokerage houses, or<br>cooperatives. | s                | Savings account at Chase   | -   | 300.00   |
| 3.  | Security deposits with public utilities, telephone companies, landlords, and others.  | X                |  |   |  |
| 4.  | Household goods and furnishings, including audio, video, and computer equipment.  | p<br>a           | laptop (7 years old), 1 printer, 4 televisions, 3 DVI<br>layers, miscellaneous appliances, kitchen table<br>nd chairs, 1 couch, dining and end tables, 1<br>elevision stand, 2 set of bedroom furniture. | ) -   | 1,200.00   |
| 5.  | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.  | X                |  |   |  |
| 6.  | Wearing apparel.  | N                | liscellaneous wearing apparel  | -   | 150.00   |
| 7.  | Furs and jewelry.   |                  | fur (50+ years old), 1 watch, miscellaneous ostume jewelry   | -   | 350.00   |
| 8.  | Firearms and sports, photographic, and other hobby equipment.   | 2                | 9MM Ruger<br>tennis raquets<br>bikes   | -   | 300.00   |
| 9.  | Interests in insurance policies.<br>Name insurance company of each<br>policy and itemize surrender or<br>refund value of each.  | X                |  |   |  |
| 10. | Annuities. Itemize and name each issuer.  | X                |  |   |  |
|     |   |                  | (Total   | Sub-Tota of this page)                      | al > <b>2,570.00</b>   |

2 continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

| In re | Laura E. Wishnoff | Case No. |
|-------|-------------------|----------|
| -     |                   | Debtor   |

# SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

|     |   | N           |                                      | Husband,             | Current Value of  |
|-----|---|-------------|--------------------------------------|----------------------|---|
|     | Type of Property  | O<br>N<br>E | Description and Location of Property | Wife,<br>Joint, or   | Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | Х           |                                      |                      |   |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.   | X           |                                      |                      |   |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize.   | X           |                                      |                      |   |
| 14. | Interests in partnerships or joint ventures. Itemize.   | X           |                                      |                      |   |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments.  | X           |                                      |                      |   |
| 16. | Accounts receivable.  | X           |                                      |                      |   |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.  | Child suppo | ort                                  | -                    | 600.00  |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars.  | X           |                                      |                      |   |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.  | x           |                                      |                      |   |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.  | X           |                                      |                      |   |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | X           |                                      |                      |   |
|     |   |             |                                      | Sub-Tota             | al > <b>600.00</b>  |
|     |   |             | •                                    | (Total of this page) |   |

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

| In re | Laura E. Wishnoff | Case No |
|-------|-------------------|---------|
|       |                   |         |

Debtor

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

|     | Type of Property  | N O Description and Location of Property E       | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|--|---|---|
| 22. | Patents, copyrights, and other intellectual property. Give particulars.   | X  |   |   |
| 23. | Licenses, franchises, and other general intangibles. Give particulars.  | x  |   |   |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | x  |   |   |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories.  | 2012 Jeep Cherokee - Grand Laredo (60,000 miles) | -   | 17,100.00   |
| 26. | Boats, motors, and accessories.   | x  |   |   |
| 27. | Aircraft and accessories.   | x  |   |   |
| 28. | Office equipment, furnishings, and supplies.  | 1 desk, 1 chair                                  | -   | 100.00  |
| 29. | Machinery, fixtures, equipment, and supplies used in business.  | x  |   |   |
| 30. | Inventory.  | x  |   |   |
| 31. | Animals.  | x  |   |   |
| 32. | Crops - growing or harvested. Give particulars.   | x  |   |   |
| 33. | Farming equipment and implements.   | x  |   |   |
| 34. | Farm supplies, chemicals, and feed.   | X  |   |   |
| 35. | Other personal property of any kind not already listed. Itemize.  | x  |   |   |

Sub-Total >
(Total of this page)
Total >

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

17,200.00

20,370.00

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B6C (Official Form 6C) (4/13)

| In re | Laura E. Wishnoff | Case No |
|-------|-------------------|---------|
|       |                   | ,       |

Debtor

| SCHEDULE C - PROPERTY CLAIMED AS EXEMPT  |  |   |   |  |  |  |  |  |
|--|--|---|---|--|--|--|--|--|
| Debtor claims the exemptions to which debtor is entitled u (Check one box)  ☐ 11 U.S.C. §522(b)(2)  ☐ 11 U.S.C. §522(b)(3)   |  | er: Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years ther with respect to cases commenced on or after the date of adjustment |   |  |  |  |  |  |
| Description of Property  | Specify Law Provide Each Exemption               | ling Value of Claimed Exemption   | Current Value of<br>Property Without<br>Deducting Exemption |  |  |  |  |  |
| Real Property Debtor's residence - 435 Morton Street, Hoffman Estates, IL  | 735 ILCS 5/12-901                                | 15,000.00   | 185,000.00  |  |  |  |  |  |
| Cash on Hand<br>Cash on Debtor's person  | 735 ILCS 5/12-1001(b)                            | 20.00   | 20.00   |  |  |  |  |  |
| Checking, Savings, or Other Financial Accounts, Concerning account at Chase  | Certificates of Deposit<br>735 ILCS 5/12-1001(b) | 250.00  | 250.00  |  |  |  |  |  |
| Savings account at Chase   | 735 ILCS 5/12-1001(b)                            | 300.00  | 300.00  |  |  |  |  |  |
| Household Goods and Furnishings 1 laptop (7 years old), 1 printer, 4 televisions, 3 DVD players, miscellaneous appliances, kitchen table and chairs, 1 couch, dining and end tables, 1 television stand, 2 set of bedroom furniture. | 735 ILCS 5/12-1001(b)                            | 1,200.00  | 1,200.00  |  |  |  |  |  |
| Wearing Apparel Miscellaneous wearing apparel  | 735 ILCS 5/12-1001(a)                            | 150.00  | 150.00  |  |  |  |  |  |
| Furs and Jewelry 1 fur (50+ years old), 1 watch, miscellaneous costume jewelry   | 735 ILCS 5/12-1001(b)                            | 350.00  | 350.00  |  |  |  |  |  |
| Firearms and Sports, Photographic and Other Hob<br>1 9MM Ruger<br>2 tennis raquets<br>2 bikes  | by Equipment<br>735 ILCS 5/12-1001(b)            | 300.00  | 300.00  |  |  |  |  |  |
| Alimony, Maintenance, Support, and Property Settl<br>Child support   | lements<br>735 ILCS 5/12-1001(g)(                | 4) 600.00   | 600.00  |  |  |  |  |  |
| <u>Automobiles, Trucks, Trailers, and Other Vehicles</u><br>2012 Jeep Cherokee - Grand Laredo (60,000<br>miles)  | 735 ILCS 5/12-1001(c)                            | 2,400.00  | 17,100.00   |  |  |  |  |  |

| Total: 20.570.00 205.270.00 |  |
|-----------------------------|--|

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B6D (Official Form 6D) (12/07)

| In re | Laura E. Wishnoff | Case No |  |
|-------|-------------------|---------|--|
|       |                   | ,       |  |
|       |                   | Debtor  |  |

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | Hu<br>H<br>W<br>J<br>C | sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED,  NATURE OF LIEN, AND  DESCRIPTION AND VALUE  OF PROPERTY  SUBJECT TO LIEN | CONT INGEN   | UNLIQUIDATED | D I SPUTED | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
|--|----------|------------------------|--|--------------|--------------|------------|--|---------------------------------|
| Account No.  |          |                        | Mortgage   | Т            | T<br>E       |            |  |                                 |
| Bank of America<br>P.O. Box 650070<br>Dallas, TX 75265   |          | _                      | Debtor's residence - 435 Morton Street,<br>Hoffman Estates, IL   |              | D            |            |  |                                 |
|  |          |                        | Value \$ 185,000.00  | 1            |              |            | 167,372.00   | 0.00                            |
| Account No.  | T        |                        | Automobile Ioan  | П            |              | Н          | ,  | 3.00                            |
| PNC Bank<br>P.O. Box 747066<br>Pittsburgh, PA 15274  |          | -                      | 2012 Jeep Cherokee - Grand Laredo<br>(60,000 miles)  |              |              |            |  |                                 |
|  |          |                        | Value \$ 17,100.00   | 1            |              |            | 22,877.00  | 5,777.00                        |
| Account No.  |          |                        | Value \$   |              |              |            |  |                                 |
| Account No.  |          |                        |  |              |              |            |  |                                 |
|  |          |                        | Value \$   |              |              |            |  |                                 |
| continuation sheets attached   |          | •                      | S<br>(Total of t   | ubt<br>his p |              |            | 190,249.00   | 5,777.00                        |
|  |          |                        | (Report on Summary of Sc   |              | ota<br>ule   |            | 190,249.00   | 5,777.00                        |

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B6E (Official Form 6E) (4/13)

| In re | Laura E. Wishnoff | Case No. |  |
|-------|-------------------|----------|--|
| -     |                   | Debtor   |  |

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

| Check this box it debtor has no creditors holding this ectified priority claims to report on this schedule E.   |
|---|
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)   |
| Domestic support obligations  Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relation of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).   |
| □ Extensions of credit in an involuntary case  Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).  |
| Wages, salaries, and commissions  Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| ☐ Contributions to employee benefit plans  Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busine whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).  |
| ☐ Certain farmers and fishermen  Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).   |
| ☐ <b>Deposits by individuals</b> Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).   |
| ☐ Taxes and certain other debts owed to governmental units  Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).   |
| Commitments to maintain the capital of an insured depository institution  Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).  |
| ☐ Claims for death or personal injury while debtor was intoxicated  Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).  |

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

| In re | Laura E. Wishnoff | Case No | _ |
|-------|-------------------|---------|---|
| -     |                   | Debtor  |   |

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| 8  |             |             |  |               |            |        |             |                 |
|--|-------------|-------------|--|---------------|------------|--------|-------------|-----------------|
| CREDITOR'S NAME,   | C O D E B T | Hu          | sband, Wife, Joint, or Community             | Č             | U          | Ŀ      | ग           |                 |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)           |             | C<br>H<br>M | IS SUBJECT TO SETOFF, SO STATE.              | L Z G         | DZ1-QD-DAH | T<br>F | U<br>T<br>F | AMOUNT OF CLAIM |
| Account No. x2938  |             |             | Medical Services                             | Т             | T          |        |             |                 |
| Advanced Pain Consultants<br>P.O. Box 570<br>Lake Forest, IL 60045-0570                    |             | -           |  |               | E<br>D     |        |             | 481.79          |
| Account No. xxx6592  |             | T           | Medical services                             | П             | Г          | T      | 7           |                 |
| Adventist GlenOaks Hospital<br>75 Remittance Drive<br>Suite 3125<br>Chicago, IL 60675-3125 |             | -           |  |               |            |        |             | 358.37          |
| Account No. xxxxxxxxxxxx6603   | T           |             | Claim incurred from miscellaneous purchases. | H             | Г          | t      | $\dagger$   |                 |
| Ashley Furniture<br>Synchrony Bank<br>P.O. Box 960061<br>Orlando, FL 32896-0061            | x           | -           |  |               |            |        |             | 5,664.87        |
| Account No. xxxx-xxxxxx-x2430  |             |             | Claim incurred from miscellaneous purchases. |               |            | T      | 7           |                 |
| Bank of America<br>P.O. Box 851001<br>Dallas, TX 75285-1001                                |             | -           |  |               |            |        |             | 4,759.76        |
|  | Щ           | 上           |  | <u>Ш</u>      | <u></u>    | L      | +           | •               |
| 2 continuation sheets attached   |             |             | S<br>(Total of tl                            | Subt<br>his p |            |        | )           | 11,264.79       |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Laura E. Wishnoff | Case No. |  |
|-------|-------------------|----------|--|
| _     |                   | Debtor   |  |

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|   |          |             |   |            |             | _      | 1               |
|---|----------|-------------|---|------------|-------------|--------|-----------------|
| CREDITOR'S NAME,  | C        | Hu          | sband, Wife, Joint, or Community  | S          | U N L       | P      |                 |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)          | CODEBTOR | C<br>A<br>M | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | _ Q U _ D   | SPUTED | AMOUNT OF CLAIM |
| Account No. x-x1005   |          |             | Claim incurred from miscellaneous charges.  | Т          | Ā<br>T<br>E |        |                 |
| Blue Cash by American Express<br>Box 0001<br>Los Angeles, CA 90096-8000                   |          | -           |   |            | D           |        | 9,219.99        |
| Account No.   |          | Г           | Claim incurred from miscellaneous charges.  |            |             | Г      |                 |
| Citi Preferred Card<br>Processing Center<br>Des Moines, IA 50363-0005                     |          | -           |   |            |             |        | 3,349.00        |
| Account No. 0975  | ╁        | ╁           | Claim incurred from miscellaneous charges.  |            |             |        |                 |
| Discover More Card<br>P.O. Box 6103<br>Carol Stream, IL 60197-6103                        |          | -           |   |            |             |        | 13,181.36       |
| Account No. xxxxxx4327  | T        | Т           | Claim incurred from miscellaneous charges.  |            |             | Г      |                 |
| Kohls<br>P.O. Box 2983<br>Milwaukee, WI 53201-2983  |          | -           |   |            |             |        | 399.40          |
| Account No. xxxxxxxxx4155   | T        | T           | Medical services  |            |             | T      |                 |
| Nicholas Kondelis<br>c/o Millennium Health<br>16981 Via Tazon<br>San Diego, CA 92127-1645 |          | _           |   |            |             |        | 250.00          |
| Sheet no. 1 of 2 sheets attached to Schedule of   |          |             |   | Sub        | tota        | ıl     | 00 200 75       |
| Creditors Holding Unsecured Nonpriority Claims  |          |             | (Total of t   | his        | pag         | ge)    | 26,399.75       |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Laura E. Wishnoff | Case No. |  |
|-------|-------------------|----------|--|
|       |                   | Debtor   |  |

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|   | _        |          |  | _                  | _    | _      | _       |                 |
|---|----------|----------|--|--------------------|------|--------|---------|-----------------|
| CREDITOR'S NAME,  |          | Hu       | sband, Wife, Joint, or Community           |                    | U    | D      | 1       |                 |
| MAILING ADDRESS   | CODEBTOR | н        | DATE CLAIM WAS INCURRED AND                | Ň                  | UNL  | S<br>P |         |                 |
| INCLUDING ZIP CODE,   | B        | W        | CONSIDERATION FOR CLAIM. IF CLAIM          | 1                  | Q    | U      |         |                 |
| AND ACCOUNT NUMBER  | T        | J        | IS SUBJECT TO SETOFF, SO STATE.            | N                  | ľ    | ΙE     |         | AMOUNT OF CLAIM |
| (See instructions above.)                                     | Ř        | С        | is secretarion serving.                    | N<br>G<br>E<br>N   | Þ    | Ď      |         |                 |
| Account No. xxxx6855  | ┪        | $\vdash$ | Medical services                           | <b>⊣</b> ™         | lΤ   |        | H       |                 |
| Account No. AAAA0033  | 1        |          | Wedical Sel Vices                          |                    | Ė    |        |         |                 |
| l   |          |          |  | -                  | ۲    | H      | ┨       |                 |
| Northwest Community Hospital                                  |          |          |  |                    |      |        |         |                 |
| 25706 Network Place   |          | -        |  |                    |      |        |         |                 |
| Chicago, IL 60673-1257  |          |          |  |                    |      |        |         |                 |
|   |          |          |  |                    |      |        |         |                 |
|   |          |          |  |                    |      |        |         | 422.71          |
|   | ┺        | <u> </u> |  | 丄                  | ┺    | L      | 4       |                 |
| Account No. xxxx4741  |          |          | Medical Services                           |                    |      |        |         |                 |
|   | 1        |          |  |                    |      |        |         |                 |
| Northwest Community Hospital                                  |          |          |  |                    |      |        |         |                 |
| 25706 Network Place   |          | -        |  |                    |      |        |         |                 |
| Chicago, IL 60673-1257  |          |          |  |                    |      |        |         |                 |
| Cilicago, IL 00073-1237                                       |          |          |  |                    |      |        |         |                 |
|   |          |          |  |                    |      |        |         |                 |
|   |          |          |  |                    |      |        |         | 274.59          |
| Account No. xxxx-xxxx-0381                                    | ✝        | $\vdash$ | Claim incurred from miscellaneous charges. | +                  | +    | t      | +       |                 |
| Account No. AAAA-AAAA-AAAA-OOOT                               | 1        |          | Claim incurred from miscenarieous charges. |                    |      |        |         |                 |
| L   |          |          |  |                    |      |        |         |                 |
| Slate from Chase  |          |          |  |                    |      |        |         |                 |
| Cardmember Service  |          | -        |  |                    |      |        |         |                 |
| P.O. Box 15123  |          |          |  |                    |      |        |         |                 |
| Wilmington, DE 19850-5123                                     |          |          |  |                    |      |        |         |                 |
|   |          |          |  |                    |      |        |         | 5,524.26        |
|   | ╀        | ┡        |  | +                  | ╀    | ┞      | +       | •               |
| Account No. xxxx-xxxx-xxxx-3115                               | 1        |          | Claim incurred from miscellaneous charges. |                    |      |        |         |                 |
|   |          |          |  |                    |      |        |         |                 |
| US Bank   |          |          |  |                    |      |        |         |                 |
| P.O. Box 790408   |          | -        |  |                    |      |        |         |                 |
| Saint Louis, MO 63179-0408                                    |          |          |  |                    |      |        |         |                 |
| ,   |          |          |  |                    |      |        |         |                 |
|   |          |          |  |                    |      |        |         | 11,636.74       |
|   | ┖        |          |  | $oldsymbol{\perp}$ |      | L      | $\perp$ | 11,000114       |
| Account No.   |          |          |  |                    |      |        |         |                 |
|   | 1        |          |  |                    |      |        |         |                 |
|   |          |          |  |                    |      |        |         |                 |
|   |          |          |  |                    |      |        |         |                 |
|   |          |          |  |                    |      |        |         |                 |
|   |          |          |  |                    |      |        |         |                 |
|   | 1        | 1        |  |                    |      | 1      |         |                 |
|   | 1        | 1        |  |                    |      | 1      |         |                 |
| Sheet no. <b>2</b> of <b>2</b> sheets attached to Schedule of |          |          |  | Sub                | tota | ıl     | $\top$  |                 |
| Creditors Holding Unsecured Nonpriority Claims                |          |          | (Total of                                  |                    |      |        |         | 17,858.30       |
| Creditors froming Onsecured Nonpriority Clauds                |          |          | (10tal of t                                | .1118              | pag  | 3e)    | ' ├     |                 |
|   |          |          |  | 7                  | Γota | al     |         |                 |
|   |          |          | (Report on Summary of So                   | che                | dule | es)    |         | 55,522.84       |
|   |          |          |  |                    |      |        |         |                 |

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B6G (Official Form 6G) (12/07)

| In re | Laura E. Wishnoff | Case No     |  |
|-------|-------------------|-------------|--|
| -     |                   | ,<br>Debtor |  |

## SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

PNC Bank P.O. Box 747066 Pittsburgh, PA 15274 Auto purchase contract

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B6H (Official Form 6H) (12/07)

| In re | Laura E. Wishnoff |        | Case No. |  |
|-------|-------------------|--------|----------|--|
| ,     |                   | Debtor |          |  |

## **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

Nick Prechodko

Ashley Furniture
Synchrony Bank
P.O. Box 960061
Orlando, FL 32896-0061

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| Fill        | in this information to identify your  | case:  |                                 |           |                           | l           |             |                       |                            |            |
|-------------|---|--|---------------------------------|-----------|---------------------------|-------------|-------------|-----------------------|----------------------------|------------|
|             | otor 1 Laura E. Wi  |  |                                 |           |                           |             |             |                       |                            |            |
|             | otor 2<br>puse, if filing)  |  |                                 |           |                           |             |             |                       |                            |            |
| Uni         | ted States Bankruptcy Court for the   | e: NORTHERN DISTRIC                                  | CT OF ILLINOIS                  |           |                           |             |             |                       |                            |            |
|             | se number<br>nown)  |  | -                               |           |                           | □ A         |             | ed filing<br>ent show | ring post-petitio          |            |
| O.          | fficial Form B 6I   |  |                                 |           |                           | _           |             |                       | following date             | :          |
|             | chedule I: Your Inc   | ome  |                                 |           |                           | M           | IM / DD/ `  | YYYY                  |                            | 12/13      |
| spo<br>atta | plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The describe Employment | ur spouse is not filing w<br>On the top of any addit | ith you, do not inclu           | de infor  | mati                      | on abou     | t your sp   | ouse. If              | more space is              | needed,    |
| 1.          | Fill in your employment information.  |  | Debtor 1                        |           |                           |             | Debtor      | 2 or non              | -filing spouse             |            |
|             | If you have more than one job, attach a separate page with  | Employment status                                    | ■ Employed □ Not employed       |           | ☐ Employed ☐ Not employed |             |             |                       |                            |            |
|             | information about additional employers.   | Occupation   | Regional Manag                  | ıer       |                           |             |             |                       |                            |            |
|             | Include part-time, seasonal, or self-employed work.   | Employer's name                                      | Cornerstone Re                  |           | te                        |             |             |                       |                            |            |
|             | Occupation may include student or homemaker, if it applies.   | Employer's address                                   | 321 N. Clark<br>Chicago, IL 606 | 54        |                           |             |             |                       |                            |            |
|             |   | How long employed t                                  | there? 1 montl                  | 1         |                           |             | _           |                       |                            |            |
| Par         | Give Details About Mo   | nthly Income   |                                 |           |                           |             |             |                       |                            |            |
|             | mate monthly income as of the cuse unless you are separated.  | date you file this form. If                          | you have nothing to r           | eport for | any                       | line, write | e \$0 in th | e space.              | Include your no            | on-filing  |
| -           | u or your non-filing spouse have me space, attach a separate sheet to   |  | combine the informatio          | n for all | emp                       | loyers for  | that pers   | on on the             | e lines below. I           | f you need |
|             |   |  |                                 |           |                           | For Deb     | otor 1      |                       | ebtor 2 or<br>iling spouse |            |
| 2.          | List monthly gross wages, sala deductions). If not paid monthly,  |  |                                 | 2.        | \$                        | 2,          | ,349.92     | \$                    | N/A                        |            |
| 3.          | Estimate and list monthly over  | time pay.  |                                 | 3.        | +\$                       |             | 0.00        | +\$ _                 | N/A                        | -          |
| 4.          | Calculate gross Income. Add I   | ine 2 + line 3.                                      |                                 | 4.        | \$                        | 2,34        | 19.92       | \$_                   | N/A                        |            |

| Debt | or 1   | Laura E. Wishnoff  | _   | Case nun                                     | nber ( <i>if known</i> )                                       |   |   |              |
|------|--|--|---|--|--|---|---|--------------|
|      | Cop  | y line 4 here  | 4.  | For De                                       | ebtor 1<br>2,349.92  |   | btor 2 or<br>ing spouse<br>N/A                |              |
| 5.   | -  | all payroll deductions:  |   |  | _,   |   |   |              |
| J.   | 5a.<br>5b.<br>5c.<br>5d.<br>5e.<br>5f.<br>5g.<br>5h. | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:  | 5a.<br>5b.<br>5c.<br>5d.<br>5e.<br>5f.<br>5g. | \$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$ | 404.08<br>0.00<br>0.00<br>0.00<br>0.00<br>0.00<br>0.00<br>0.00 | \$<br>\$<br>\$ \$ \$<br>\$ \$<br>\$ \$<br>\$ \$ | N/A<br>N/A<br>N/A<br>N/A<br>N/A<br>N/A<br>N/A |              |
| 6.   | Add  | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | 6.  | \$   | 404.08   | \$  | N/A   |              |
| 7.   | Calo   | culate total monthly take-home pay. Subtract line 6 from line 4.   | 7.  | \$   | 1,945.84   | \$  | N/A   |              |
| 8.   |  | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive  Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive  Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income  Other monthly income. Specify: | 8c.<br>8d.<br>8e.                             | \$<br>\$<br>\$ \$<br>\$ \$                   | 0.00<br>0.00<br>0.00<br>0.00<br>0.00                           | \$<br>\$<br>\$<br>\$<br>\$<br>\$<br>\$          | N/A<br>N/A<br>N/A<br>N/A<br>N/A<br>N/A        |              |
| 9.   | Add  | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.  | \$   | 0.00   | \$  | N/A   |              |
| 10.  |  | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   | 10. \$  | 1,9  | 45.84 + \$_  | ı   | N/A = \$ <u>1</u>                             | ,945.84      |
| 11.  | Inclu<br>othe  | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, you er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:  | ır depen                                      |  |  | •   | nedule J.<br>11. +\$                          | 0.00         |
| 12.  |  | the amount in the last column of line 10 to the amount in line 11. The ree that amount on the Summary of Schedules and Statistical Summary of Certalies  |   |  |  |   | 12. \$ <u>1</u>                               | ,945.84<br>d |
| 13.  | Do y   | you expect an increase or decrease within the year after you file this form  | 1?  |  |  |   | monthly i                                     | income       |

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| E-14-      | . ()-1                        |                                       |                          |  |   |         |                    |  |
|------------|-------------------------------|---------------------------------------|--------------------------|--|---|---------|--------------------|--|
|            |                               | tion to identify y                    | our case:                |  |   |         |                    |  |
| Debte      | or 1                          | Laura E. Wis                          | hnoff                    |  |   |         | eck if this is:    |  |
| Debte      | or 2                          |                                       |                          |  |   |         | An amended filing  | wing post-petition chapter                   |
|            | use, if filing)               |                                       |                          |  |   |         |                    | the following date:                          |
| Unite      | ed States Bankr               | untcy Court for the                   | NORTH                    | IERN DISTRICT OF ILLIN                                     | IOIS                                    |         | MM / DD / YYYY     |  |
|            |                               | aptoy Court for the                   | NOITH                    | IERRY DIGITATOR OF TEETIN                                  |   | _       |                    | - Dahlar Oharası - Dahla                     |
| (If kn     | e number<br>own)              |                                       |                          |  |   |         | 2 maintains a sepa | or Debtor 2 because Debto<br>arate household |
| Of         | ficial Fo                     | rm B 6J                               |                          |  |   |         |                    |  |
| Sc         | hedule                        | J: Your                               | _<br>Exper               | ises   |   |         |                    | 12/13  |
| Be a       | s complete rmation. If m      | and accurate as                       | s possible<br>eded, atta | . If two married people a<br>ich another sheet to this     |   |         |                    |  |
| Part<br>1. | 1: Descri                     | ribe Your House                       | ehold                    |  |   |         |                    |  |
| ••         | _ `                           |                                       |                          |  |   |         |                    |  |
|            | ■ No. Go to                   |                                       | in a separ               | ate household?   |   |         |                    |  |
|            | □N                            |                                       |                          |  |   |         |                    |  |
|            | ΠY                            | es. Debtor 2 mu                       | st file a sep            | parate Schedule J.   |   |         |                    |  |
| 2.         | Do you have                   | e dependents?                         | □ No                     |  |   |         |                    |  |
|            | Do not list D                 |                                       | Yes.                     | Fill out this information for each dependent               | Dependent's relation Debtor 1 or Debtor |         | Dependent's age    | Does dependent live with you?                |
|            | Do not state                  |                                       |                          | •  |   |         |                    | □ No   |
|            | dependents'                   |                                       |                          |  | Son                                     |         | 9                  | ■ Yes  |
|            |                               |                                       |                          |  |   |         |                    | □ No   |
|            |                               |                                       |                          |  |   |         |                    | ☐ Yes  |
|            |                               |                                       |                          |  |   |         |                    | ☐ No   |
|            |                               |                                       |                          |  |   |         |                    | ☐ Yes  |
|            |                               |                                       |                          |  |   |         |                    | ☐ No   |
| _          | _                             |                                       |                          |  |   |         |                    | ☐ Yes  |
| 3.         |                               | enses include                         | han $\blacksquare$       | No   |   |         |                    |  |
|            |                               | f people other t<br>d your depende    |                          | Yes  |   |         |                    |  |
|            | <u> </u>                      |                                       |                          |  |   |         |                    |  |
| Part       |                               | ate Your Ongoi                        |                          |  | dit- 6                                  |         |                    |  |
| expe       |                               |                                       |                          | uptcy filing date unless y<br>y is filed. If this is a sup |   |         |                    | of the form and fill in the                  |
|            |                               |                                       |                          | government assistance                                      |   |         |                    |  |
|            | value of suc<br>icial Form 6I |                                       | a nave inc               | cluded it on Schedule I:                                   | Your Income                             |         | Your exp           | enses  |
| 4.         |                               | or home owners<br>and any rent for th |                          | ses for your residence. I                                  | Include first mortgage                  | e<br>4. | \$                 | 1,030.35                                     |
|            | If not include                | led in line 4:                        |                          |  |   |         |                    |  |
|            | 4a. Real                      | estate taxes                          |                          |  |   | 4a.     | \$                 | 375.00                                       |
|            | 4b. Prope                     | rty, homeowner's                      | s, or renter             | 's insurance   |   | 4b.     | ·                  | 73.00  |
|            | 4c. Home                      | maintenance, re                       | epair, and u             | upkeep expenses  |   | 4c.     | \$                 | 150.00                                       |
|            |                               | owner's associa                       |                          |  |   | 4d.     | \$                 | 0.00   |
| 5          | Additional r                  | nortasae navm                         | ants for vo              | our residence, such as ho                                  | me equity loans                         | 5       | \$                 | 0.00   |

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| Debtor 1           | Laura E. Wishnoff   | Case num                 | ber (if known) |                          |
|--------------------|---|--------------------------|----------------|--------------------------|
| 6. <b>Utilit</b> i | ies:  |                          |                |                          |
| 6a.                | Electricity, heat, natural gas  | 6a.                      | \$             | 172.00                   |
| 6b.                | Water, sewer, garbage collection  | 6b.                      | · -            | 30.00                    |
| 6c.                | Telephone, cell phone, Internet, satellite, and cable services  | 6c.                      | -              | 400.00                   |
| 6d.                | Other. Specify:   | 6d.                      |                | 0.00                     |
|                    | I and housekeeping supplies   | <del>-</del> 7.          | · .            | 400.00                   |
|                    | dcare and children's education costs  | 8.                       |                | 209.00                   |
|                    | ning, laundry, and dry cleaning   | 9.                       | · .            | 150.00                   |
|                    | onal care products and services   | 10.                      |                | 50.00                    |
|                    | cal and dental expenses   | 11.                      |                | 155.00                   |
|                    | sportation. Include gas, maintenance, bus or train fare.  |                          | <u> </u>       | 100.00                   |
|                    | ot include car payments.  | 12.                      | \$             | 130.00                   |
|                    | rtainment, clubs, recreation, newspapers, magazines, and books  | 13.                      | \$             | 50.00                    |
|                    | itable contributions and religious donations  | 14.                      | \$             | 0.00                     |
| 5. <b>Insur</b>    | •   |                          |                |                          |
| Do no              | ot include insurance deducted from your pay or included in lines 4 or 20.   |                          |                |                          |
| 15a.               | Life insurance  | 15a.                     | \$             | 8.33                     |
| 15b.               | Health insurance  | 15b.                     | \$             | 600.00                   |
| 15c.               | Vehicle insurance   | 15c.                     | \$             | 60.00                    |
| 15d.               | Other insurance. Specify:   | 15d.                     | \$             | 0.00                     |
| 6. <b>Taxe</b>     | s. Do not include taxes deducted from your pay or included in lines 4 or 20.  |                          |                | ·                        |
| Speci              | ify:  | 16.                      | \$             | 0.00                     |
|                    | Illment or lease payments:  |                          |                | <u> </u>                 |
| 17a.               | Car payments for Vehicle 1  | 17a.                     | \$             | 468.00                   |
| 17b.               | Car payments for Vehicle 2  | 17b.                     | \$             | 0.00                     |
| 17c.               | Other. Specify:   | 17c.                     | \$             | 0.00                     |
| 17d.               | Other. Specify:   | 17d.                     | \$             | 0.00                     |
|                    | payments of alimony, maintenance, and support that you did not report as  | <br>18.                  | <u> </u>       | 0.00                     |
|                    | acted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  | 10.                      |                |                          |
|                    | r payments you make to support others who do not live with you.   | 40                       | \$             | 0.00                     |
| Speci              | r real property expenses not included in lines 4 or 5 of this form or on <i>Sche</i> e  | 19.                      |                |                          |
|                    |   | <i>auie I: Y</i><br>20a. |                | 0.00                     |
|                    | Mortgages on other property   | 20a.<br>20b.             | · -            | 0.00                     |
|                    | Real estate taxes   |                          |                | 0.00                     |
|                    | Property, homeowner's, or renter's insurance  | 20c.                     |                | 0.00                     |
|                    | Maintenance, repair, and upkeep expenses  | 20d.                     |                | 0.00                     |
|                    | Homeowner's association or condominium dues   | 20e.                     |                | 0.00                     |
| 1. Other           | r: Specify:   | 21.                      | +\$            | 0.00                     |
| 2 Your             | monthly expenses. Add lines 4 through 21.   | 22.                      | \$             | 4,510.68                 |
|                    | result is your monthly expenses.  |                          |                | 4,310.00                 |
|                    | ulate your monthly net income.  |                          |                |                          |
|                    | Copy line 12 (your combined monthly income) from Schedule I.  | 23a.                     | \$             | 1,945.84                 |
|                    | Copy your monthly expenses from line 22 above.  | 23b.                     |                | 4,510.68                 |
|                    |   |                          |                | 7,010.00                 |
| 23c.               | Subtract your monthly expenses from your monthly income.  |                          |                |                          |
|                    | The result is your <i>monthly net income</i> .  | 23c.                     | \$             | -2,564.84                |
|                    | <b>7 7</b>  |                          |                |                          |
| For ex             | ou expect an increase or decrease in your expenses within the year after you cample, do you expect to finish paying for your car loan within the year or do you expect your motication to the terms of your mortgage? |                          |                | or decrease because of a |
| ■ No               |   |                          |                |                          |
| <b>-</b> N(        |   |                          |                |                          |
| □ Ye               |   |                          |                |                          |

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B6 Declaration (Official Form 6 - Declaration). (12/07)

# **United States Bankruptcy Court Northern District of Illinois**

| In re | Laura E. Wishnoff |           | Case No. |   |
|-------|-------------------|-----------|----------|---|
|       |                   | Debtor(s) | Chapter  | 7 |

## DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_18 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date 0/27///

Signature

Laura E. Wishnoff

Debto

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

## United States Bankruptcy Court Northern District of Illinois

| In re | Laura E. Wishnoff | Debtor(s)  | Case No.<br>Chapter | 7 |
|-------|-------------------|------------|---------------------|---|
|       |                   | Desitor(s) | Chapter             |   |

## STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE \$25,018.41 2015 YTD: \$90,250.00 2014: \$78,694.00 2013:

## 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

\$2,000.00

2015: YTD - Unemployment Compensation

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## 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF **PAYMENTS** 

AMOUNT PAID

AMOUNT STILL OWING

None

Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF

**AMOUNT** PAID OR VALUE OF

AMOUNT STILL

NAME AND ADDRESS OF CREDITOR

PAYMENTS/ TRANSFERS

**TRANSFERS** 

**OWING** 

None

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL **OWING** 

## 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF **PROCEEDING**  COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF **PROPERTY** 

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION. FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF **ASSIGNMENT** 

TERMS OF ASSIGNMENT OR SETTLEMENT

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF

**PROPERTY** 

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

### 9. Payments related to debt counseling or bankruptcy

None 

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Ottenheimer Law Group, LLC 750 Lake Cook Road Suite 290 Buffalo Grove, IL 60089

DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

\$2,800.00

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### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED
AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

## 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

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### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF NOTICE **ENVIRONMENTAL** 

LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

**ENVIRONMENTAL** 

NOTICE LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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## 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities

within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

BEGINNING AND **ENDING DATES** 

**NAME** 

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

**NAME** ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books None of account and records, or prepared a financial statement of the debtor.

**NAME** 

**ADDRESS** 

DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

**ADDRESS** 

None

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within two years immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

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20. Inventories

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory,

and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

RECORDS

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None

b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case.

**NAME** 

**ADDRESS** 

DATE OF WITHDRAWAL

None

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT.

RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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## 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\*\*\*\*\*

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date

Signature

Laura E. Wishnoff

Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

# United States Bankruptcy Court Northern District of Illinois

|                  |  | Northern Dis             | strict of Illinois                        |                                |                                  |
|------------------|--|--------------------------|---|--------------------------------|----------------------------------|
| In re            | Laura E. Wishnoff  |                          |   | Case No.                       |                                  |
|                  |  |                          | Debtor(s)                                 | Chapter                        | 7                                |
|                  | CHAPTER 7 IN   | DIVIDUAL DEBTO           | DR'S STATEMENT                            | Γ OF INTEN                     | TION                             |
| PART             | A - Debts secured by property o property of the estate. Attach a     |                          |   | ted for EAC                    | H debt which is secured by       |
| Proper           | ty No. 1   |                          |   |                                |                                  |
|                  | tor's Name:<br>of America  |                          | Describe Property S<br>Debtor's residence |                                | :<br>Street, Hoffman Estates, IL |
| Proper           | ty will be (check one):  |                          |   |                                |                                  |
|                  | Surrendered  | Retained                 |   |                                |                                  |
|                  | ning the property, I intend to (check<br>Redeem the property         | at least one):           |   |                                |                                  |
|                  | Reaffirm the debt Other. Explain                                     | (for example, avo        | oid lien using 11 U.S.C                   | C. § 522(f)).                  |                                  |
| Propert          | ty is (check one):   |                          |   |                                |                                  |
|                  | Claimed as Exempt  |                          | ☐ Not claimed as exc                      | empt                           |                                  |
| Propert          | ty No. 2   |                          |   | AN                             |                                  |
| Credite<br>PNC B | or's Name:<br>ank  |                          | Describe Property S<br>2012 Jeep Cherokee |                                |                                  |
| Propert          | ty will be (check one):  |                          |   |                                |                                  |
|                  | Surrendered  | ■ Retained               |   |                                |                                  |
|                  | ning the property, I intend to (check a                              | at least one):           |   |                                |                                  |
|                  | Reaffirm the debt Other. Explain                                     | (for example, avo        | id lien using 11 U.S.C                    | . § 522(f)).                   |                                  |
|                  | y is (check one):  |                          |   |                                |                                  |
|                  | Claimed as Exempt  |                          | ☐ Not claimed as exe                      | empt                           |                                  |
| PART E           | 3 - Personal property subject to unex dditional pages if necessary.) | pired leases. (All three | columns of Part B mus                     | st be completed                | d for each unexpired lease.      |
| Property         | y No. 1  |                          |   |                                |                                  |
| Lessor'<br>NONE- | s Name:  | Describe Leased Prop     | perty:                                    | Lease will be<br>U.S.C. § 365( | Assumed pursuant to 11 p)(2):    |

☐ YES

□ NO

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I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date 0/2///

Signature Layra E. Wishnoff

Debtor

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# **United States Bankruptcy Court Northern District of Illinois**

| In re  | E Laura E. Wis  | shnoff  |   | Case No.                                   |                                     |
|--------|---|---|---|--|-------------------------------------|
|        |   |   | Debtor(s)   | Chapter                                    | 7                                   |
|        |   |   | OMPENSATION OF ATTO   |  | • /                                 |
|        | compensation paid   | to me within one year befor   | y Rule 2016(b), I certify that I am the atter<br>the filing of the petition in bankruptcy<br>implation of or in connection with the bar | , or agreed to be paid                     | to me, for services rendered or to  |
|        | For legal servi   | ices, I have agreed to accept   |   | \$   | 2,800.00                            |
|        | Prior to the fil  | ing of this statement I have  | received  | \$   | 2,800.00                            |
|        | Balance Due   |   |   | <b>\$</b>                                  | 0.00                                |
| 2.     | The source of the c   | ompensation paid to me was  | S:  |  |                                     |
|        | Debtor  | ☐ Other (specify):  |   |  |                                     |
| 3.     | The source of comp  | pensation to be paid to me is   | :   |  |                                     |
|        | Debtor  | ☐ Other (specify):  |   |  |                                     |
| 4.     | ■ I have not agree  | ed to share the above-disclo  | sed compensation with any other person  | unless they are meml                       | pers and associates of my law firm. |
|        |   |   | compensation with a person or persons voof the names of the people sharing in the   |  |                                     |
| 5.     | In return for the ab-   | ove-disclosed fee, I have agr   | reed to render legal service for all aspect   | s of the bankruptcy c                      | ase, including:                     |
| {<br>( | <ul><li>b. Preparation and</li><li>c. Representation of</li><li>d. [Other provision</li></ul> | filing of any petition, sched<br>of the debtor at the meeting on<br>as as needed]     | and rendering advice to the debtor in det<br>tules, statement of affairs and plan which<br>of creditors and confirmation hearing, ar    | may be required;<br>and any adjourned hear | rings thereof;                      |
|        | reaffirma   | ition agreements and ap<br>(A) for avoidance of lien                                  | tors to reduce to market value; exe<br>oplications as needed; preparation<br>s on household goods.                                      | and filing of moti                         | ons pursuant to 11 USC              |
| 6. I   | Represer  | the debtor(s), the above-disc<br>ntation of the debtors in<br>r adversary proceeding. | closed fee does not include the following any dischargeability actions, judi  | service:<br>cial lien avoidance            | es, relief from stay actions or     |
|        | de to Made to control   |   | CERTIFICATION   |  |                                     |
| I      | certify that the fore   | egoing is a complete stateme  | ent of any agreement or arrangement for   | payment to me for re                       | presentation of the debtor(s) in    |
|        | ankruptcy proceedi  |   |   |  |                                     |
| Dated  | :ソ/プ  | ///(  |   |  |                                     |
|        |   |   | Lester A. Ottenhe   |  |                                     |
|        |   |   | VOttenheimer Law<br>750 Lake Cook Ro  | • •  |                                     |
|        |   |   | Suite 290   |  |                                     |
|        |   |   | Buffalo Grove, IL   |  |                                     |

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

## 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

## Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

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Form B 201A, Notice to Consumer Debtor(s)

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a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

## Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

## 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at <a href="http://www.uscourts.gov/bkforms/bankruptcy">http://www.uscourts.gov/bkforms/bankruptcy</a> forms.html#procedure.

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B 201B (Form 201B) (12/09)

# United States Bankruptcy Court Northern District of Illinois

|         | N  | Northern District of Illinois                 |                |                |                |
|---------|--|---|----------------|----------------|----------------|
| In re   | Laura E. Wishnoff                              |   | Case No.       |                |                |
|         |  | Debtor(s)                                     | Chapter        | 7              |                |
|         |  | OF NOTICE TO CONSUME<br>(b) OF THE BANKRUPTCY |                | R(S)           |                |
|         |  | Certification of Debtor                       |                | 1              |                |
|         | I (We), the debtor(s), affirm that I (we) have | received and read the attached notic          | e, as required | by § 342(b) of | the Bankruptcy |
| Code.   |  |   | ) 7/           |                | 1116           |
| Laura   | E. Wishnoff                                    | X Min (1                                      | School         | //             | 12/115         |
| Printed | l Name(s) of Debtor(s)                         | Signature of Debte                            | or //          | Date           |                |
| Case N  | lo. (if known)                                 | X Signature of Joint                          | Debtor (if any | ) Date         |                |
|         |  | Signature of Joint                            | Deolor (if any | , Date         |                |

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

# **United States Bankruptcy Court Northern District of Illinois**

|       |   | Northern District of Illinois                |                 |                           |
|-------|---|--|-----------------|---------------------------|
| In re | Laura E. Wishnoff                       |  | Case No.        |                           |
|       |   | Debtor(s)                                    | Chapter         | 7                         |
|       | •                                       | VERIFICATION OF CREDITOR M.  Number of       |                 | 16                        |
|       |   | Number of V                                  | ereditors       |                           |
|       | The above-named Debtor (our) knowledge. | (s) hereby verifies that the list of credito | ors is true and | correct to the best of my |
| Date: | May 27, 2015                            | /s/ Laura E. Wishnoff                        |                 |                           |

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# United States Bankruptcy Court Northern District of Illinois

| In re | Laura E. Wishnoff                                 |                                  | Case No.                     |                |
|-------|---|----------------------------------|------------------------------|----------------|
|       |   | Debtor(s)                        | Chapter 7                    |                |
|       |   |                                  |                              |                |
|       | VERIFIC   | CATION OF CREDITOR I             | MATRIX                       |                |
|       |   | Number o                         | f Creditors:                 | 16             |
|       |   |                                  |                              |                |
|       | The above-named Debtor(s) hereby (our) knowledge. | y verifies that the list of cred | itors is true and correct to | the best of my |

Advanced Pain Consultants P.O. Box 570 Lake Forest, IL 60045-0570

Adventist GlenOaks Hospital 75 Remittance Drive Suite 3125 Chicago, IL 60675-3125

Ashley Furniture Synchrony Bank P.O. Box 960061 Orlando, FL 32896-0061

Bank of America P.O. Box 650070 Dallas, TX 75265

Bank of America P.O. Box 851001 Dallas, TX 75285-1001

Blue Cash by American Express Box 0001 Los Angeles, CA 90096-8000

Citi Preferred Card Processing Center Des Moines, IA 50363-0005

Discover More Card P.O. Box 6103 Carol Stream, IL 60197-6103

Kohls P.O. Box 2983 Milwaukee, WI 53201-2983

Nicholas Kondelis c/o Millennium Health 16981 Via Tazon San Diego, CA 92127-1645

Nick Prechodko

Northwest Community Hospital 25706 Network Place Chicago, IL 60673-1257

Northwest Community Hospital 25706 Network Place Chicago, IL 60673-1257

PNC Bank
P.O. Box 747066
Pittsburgh, PA 15274

Slate from Chase Cardmember Service P.O. Box 15123 Wilmington, DE 19850-5123

US Bank P.O. Box 790408 Saint Louis, MO 63179-0408